

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

1. (a) Name of Individual, Organization or Corporation AMERICANS FOR PROSPERITY		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2111 WILSON BLVD SUITE 350		
(c) City, State and ZIP Code ARLINGTON VA 22201		3. FEC Identification Number <div>C C90013285</div>
2. Occupation and Name of Employer (for Individual Filers Only)		

11 / 04 / 2014

6. TOTAL CONTRIBUTIONS.....	.00
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7. TOTAL INDEPENDENT EXPENDITURES	20628.39
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10/12/2014

FEC Schedule 5 (REV. 09/2013)

SCHEDULE 5-E **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 2 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

AMERICANS FOR PROSPERITY

Full Name (Last, First, Middle Initial) of Payee

Innovative Advertising, LLC

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2014

Mailing Address 4250 Highway 22, Suite 7

Amount

4515.00

Transaction ID : F57.000001

Purpose of Expenditure
web ad creation & production ("Begich Obamacare")Category/
Type 004

Office Sought: ☐ House State: AK
☒ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
Mark BegichCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 20984.80

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Google

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2014

Mailing Address 1600 Amphitheatre Pkwy

Amount

10800.00

Transaction ID : F57.000002

Purpose of Expenditure
web ad placement ("Begich Obamacare")Category/
Type 004

Office Sought: ☐ House State: AK
☒ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
Mark BegichCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 31784.80

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Facebook

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2014

Mailing Address 1601 Willow Road

Amount

5200.00

Transaction ID : F57.000003

Purpose of Expenditure
web ad placement ("Begich Obamacare")Category/
Type 004

Office Sought: ☐ House State: AK
☒ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
Mark BegichCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 36984.80

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... 20515.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

AMERICANS FOR PROSPERITY

Full Name (Last, First, Middle Initial) of Payee
Americans for Prosperity

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2014

Mailing Address 2111 Wilson Blvd., Suite 350

Amount

City State Zip Code
Arlington VA 22201

113.39

Transaction ID : F57.000004

Purpose of Expenditure
staff salaryCategory/
Type 001Office Sought: ☐ House State: AK
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Mark BegichCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 37098.19Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... 113.39

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures..... 20628.39
(carry total from last page forward to Line 7)